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PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:) Examiner:
Ga-Lane Chen et al.) VORTMAN, ANATOLY
Serial No.: 10/648,594) Group Art Unit: 2835
Confirmation No.: 4258) Dated: Feb. 10, 2005
Filed: August 25, 2003)
For: Thermal Interface Material)
)

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Wei-Li Chang

Honorable Commissioner for Patents**Alexandria, VA 22313-1450**

Sir:

In response to the outstanding Office action mailed November 10, 2004,
consideration of the following remarks and matters are respectfully requested.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins
on page 7 of this paper.

Remarks begin on page 11 of this paper.

FEB 10 2005

PTO/SB/21 (09-04)

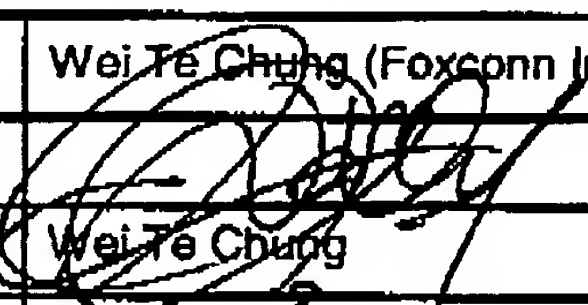
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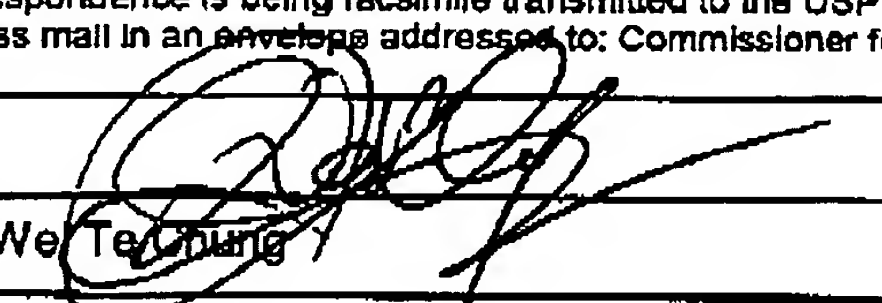
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/648,594	
	Filing Date	08/25/2003	
	First Named Inventor	Ga-Lane Chen	
	Art Unit	2835	
	Examiner Name	VORTMAN, ANATOLY	
Total Number of Pages in This Submission	12	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Wei Te Chung (Foxconn International, Inc.)		
Signature			
Printed name	Wei Te Chung		
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